Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 / minus 20=		* /			X\$ 9=		OR	X\$18=	18
	EPENDENT CL		2 minus 3 =		[*] O		ſ	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter						olumn 2	L	TOTAL		OR	TOTAL	76%
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
(Column 1) (Column 2) (Column								SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	***	F.CL AIM	= [-		X42=		OR	X84=	
	THIOTTHESE	INTATION OF W	OCTIFEE DEF	LINDLIN	CLAIN			+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL	
(Column 1) (Column 2) (Column 3)											ADDIT. FEE	
	50000 1545	CLAIMS		HIGH	IEST	(Column 3)	Г		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	IPLE DEPENDENT CLAIM			╽┠	7 ()		OR	7.01-	
								+140= TOTAL		OR	+280=	
										OR	TOTAL ADDIT. FEE	
	_											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 -	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┠	742=		OR	A04=	
*	If the entry in colu	ımn 1 ie lees thes t	he entry in only	ima 2 west	. "O" in co	lump 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The Highest Nu	amber Previously F mber Previously Pa	aid For" IN TH iid For" (Total o	IS SPACE r Independ	is less tha lent) is the	an 3, enter "3." e highest numbe		_	propriate box	_		